

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Krystyna Roslan - Szulc
Serial No:
Filing Date:
Title: THE PROTECTIVE COVERAGE OF THE OPERATIVE DENTAL INSTRUMENTS
Examiner:

COMBINED DECLARATION FOR PATENT APPLICATION
AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

THE PROTECTIVE COVERAGE OF THE OPERATIVE DENTAL INSTRUMENTS

the specification of which (check only one item below):

- <X> is attached hereto.
< > was filed as United States application
Serial No. on and
was amended on(if applicable)
< > was filed as PCT international application Number
..... on and was amended under
PCT Article 36 on(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at last one country other than the United States of America listed below and have also identified

below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN /PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Country (if PCT, indicate PCT)	Appl. No.	Date of Filing (day, month, year)	Priority Claimed under 35 USC 119
POLAND	P337833	12 JANUARY 2000	<X>Yes < >No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. Application No.	U.S Filing Date	Patented	Pending	Abandoned
		< >	< >	< >

PCT APPLICATIONS DESIGNATING THE U.S.		STATUS (Check one)		
PCT Number	PCT Filing Date	US Ser.Nos.	assigned (if any)	
			< >	< >

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.
(List name and registration number)

Horst M. Kasper (Reg. No. 28,559)
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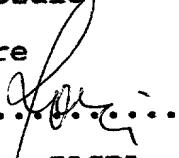
Direct Telephone Calls to: (name and telephone number)
Horst M. Kasper (908) 757-2839

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

1. Full name of sole or first inventor:

Krystyna Roslan - Szulc

Inventor's signature

.....


Date

12.01.2000

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2. Full name of second joint inventor, if any:

Second Inventor's signature

Date

.....

.....

Residence:

Citizenship:

Post Office Address:

PTO 1391 (REV. 10.83)

*%pt0:englde(PKI201DE(October 30, 2000(sn